

Statement of Contributions Received at a Social or Fund-Raising Event

Prescribed by Secretary of State 2/01

Name of Committee in Full <u>Committee for Joseph W. Testz</u>					
Full Name of Contributor <u>Paul Loper</u>				Registration Number, if PAC	
Street Address <u>6321 E. Livingston Ave.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Reynoldsburg</u>		State <u>OH</u>	Zip Code <u>43068</u>	Y <u>0</u>	Amount <u>600.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Robert Flick</u>				Registration Number, if PAC	
Street Address <u>4379 Stinson Dr.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43214</u>	Y <u>0</u>	Amount <u>25.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Jeff Edwards</u>				Registration Number, if PAC	
Street Address <u>495 S. High St.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43215</u>	Y <u>0</u>	Amount <u>1,000.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>Delena Ciamacco</u>				Registration Number, if PAC	
Street Address <u>4531 E. Walnut St.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Westerville</u>		State <u>OH</u>	Zip Code <u>43081</u>	Y <u>0</u>	Amount <u>600.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>John Royer</u>				Registration Number, if PAC	
Street Address <u>1480 Dublin Rd.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43215</u>	Y <u>0</u>	Amount <u>250.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>John Haverisen</u>				Registration Number, if PAC	
Street Address <u>587 Fox Lane</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Worthington</u>		State <u>OH</u>	Zip Code <u>43085</u>	Y <u>2</u>	Amount <u>50.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	
Full Name of Contributor <u>David Connor</u>				Registration Number, if PAC	
Street Address <u>306 E. Beck St.</u>		Employer/Occupation/Labor Organization*		M <u>0</u>	D <u>7</u>
City <u>Columbus</u>		State <u>OH</u>	Zip Code <u>43206</u>	Y <u>2</u>	Amount <u>200.00</u>
				Form (Cash, Check, etc.) <u>Check</u>	

* Required for contributions from individuals over \$100 to statewide and General Assembly candidates. If contributor is self-employed, occupation rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

Fill in the boxes below only on the last page for this event.

Transfer the Total contributions for this event to form No. 31-A. Under Full Name of Contributor state "Contributions from form No. 31-E" and list the date of the event in the date column

Total contributions this event

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Total expenditures this event.

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Page Total \$ 2,725.00